

Massachusetts Department of Public Health
Bureau of Health Professions Licensure- Drug Control Program
239 Causeway Street, Suite 500, Boston MA 02114
Medication Administration Program (MAP)
MAP Site / Clinical Review Form

Provider: Site Address: Site Phone Number: Registrant: DDS <input type="checkbox"/> DMH <input type="checkbox"/> DCF <input type="checkbox"/>	Contact: Title of Contact: Clinical Reviewer: Date of Visit:
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REVIEW KEY: C-In Compliance V- In Violation N/A-Not Applicable (at time of review)

A. Site.....Medication Emergencies	C	V	N/A	Correction Timeline	Citation 105CMR700
1. Site has a current, written list of emergency telephone numbers including the poison control center and all MAP consultants clearly posted.				Immediately	003(F)(1)(g)
2. Individual's emergency form is complete, accurate and current. Such forms shall specify for each individual the name and dosage of all current medications.				Immediately	003(F)(6)
3. Site has written policies and procedures in place which ensure staff twenty-four hour access to MAP consultant(s).				Immediately	003(F)(1)(g)
Reference Materials					
4. Site maintains medication-specific information for medication administered on site.				10 days	003(F)(6)(b)
5. Site provides Certified staff access to reference materials pertinent to medication administration including copies of all DPH advisories and a copy of the most recent DPH approved training manual.				10 days	003(F)(6)(b)

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A. Site....Reference Materials	C	V	N/A	Correction Timeline	Citation 105CMR700
6. Site provides Certified staff with the most recent DPH MAP Policy Manual (including revisions).				10 days	003(F)(6)(b)
7. Site provides Certified staff with reference materials pertinent to medication administration. (Drug reference book is on site is less than 2 years old).				10 days	003(F)(6)(b)
Medication Occurrences					
8. Site completes a DPH approved medication occurrence form for documenting the administration of medication inconsistent with the practitioner's prescription.				Immediately	003(F)(1)(f)
9. Site reports medication occurrences relating to medical intervention, illness, injury or death to DPH within 24 hours.				Immediately	003(F)(1)(f)
10. Site reports all medication occurrences in writing to DMH/DCF or DDS within 7 days.				Immediately	003(F)(1)(f)
11. Completed medication occurrence forms are kept on-file at the site.				Immediately	003(F)(1)(f)
Staff Certification					
12. Copies of all staff Certifications, Recertifications, and Specialized trainings with the dates of expiration are maintained for all staff members at the site. (If the copies are maintained by the service provider, site must maintain a current list, including expiration dates, or vice versa.)				10 days	003(F)(1)(c)
13. Site maintains a current list of CPR certifications with dates of expiration for all Certified staff members.				10 days	003(F)(1)(b)

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A. Site.....Staff Certification	C	V	N/A	Correction Timeline	Citation 105CMR700
14. If Vital signs are required for medication administration, documentation of staff training and competency, including the names of staff members, is maintained at the site.				10 days	003(F)(2)(c) 003(F)(2)(d)
Staffing					
15. Only licensed or Certified staff administer medications at all times.				Immediately	003(F)(1)(a)
16. If parenteral medications are being administered by Certified staff, staff have completed a DPH approved specialized training program.				Immediately	003(F)(5)(e) 003(F)(2)
17. If medications are administered via G-tube(s) or J-tube(s) by Certified staff, staff have completed a DPH approved specialized training program.				Immediately	003(F)(5)(e) 003(F)(2)
Vital Signs					
18. Site consults with each individual's Health Care Provider to determine if Vital signs are required for medications.				30 days	003(F)(5)(a)
19. If Vital signs are required for medication administration, site obtains specific, written parameters from the Health Care Provider.				30 days	003(F)(5)(a)
20. Vital signs are being monitored by licensed or Certified staff as ordered by the individual's Health Care Provider.				30 days	003(F)(6)
21. Vital signs are properly recorded on the medication and treatment sheet for each individual.				30 days	003(F)(6)
22. Site notifies the Health Care Provider if the Vital signs are not within the ordered parameters and obtains follow-up orders.				30 days	003(F)(6)
23. If Health Care Provider is notified, the site documents the reason for notification and the Health Care Provider's orders, in the individual's progress notes.				30 days	003(F)(6)

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Documentation					
24. Site has a copy of the Service Provider's Policy and Procedure Manual.				10 days	003(F)(1)(b)
25. Individual's records contain no evidence of crossing out, marking over or ink eradicator.				Immediately	003(F)(6)
26. If an error is made in the individual's record, a line is placed through the error, the word 'error' is written and the staff person's initials appear.				Immediately	003(F)(6)
27. Information on a specific individual's medication is available in his/her record and on a DPH approved medication and treatment form which includes: name and dosage of medication, indication for use, contraindications or allergic reactions, possible side effects , and appropriate staff response and special instructions, including steps to be taken if a dose is missed.				Immediately	003(F)(6)(a)
28. Medication and treatment forms are organized and clear.				Immediately	003(F)(6)
29. Allergies are listed.				Immediately	003(F)(6)(a)
30. Medication and treatment forms reflect that all medications were administered.				Immediately	003(F)(6)
31. Appropriate documentation indicates that medications were not administered, including reason for not administering medications.				Immediately	003(F)(6)
32. Appropriate documentation indicates notification of the Health Care Provider for refusals and for medication not administered as ordered is noted in the progress notes with recommended actions and any changes in orders.				Immediately	003(F)(6)

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33. Administration of PRN orders are documented in individual's progress notes including the reason for the administration and its' effectiveness.				Immediately	003(F)(6)
34. For an individual with a diagnosed seizure disorder, site maintains an accurate and current seizure record.				Immediately	003(F)(6)
Health Care Provider Orders/Transcription					
35. Telephone medication orders and/or medication changes are received from licensed practitioners and are properly documented in the individual's record.				Immediately	003(F)(6)(a)
36. Telephone orders are signed by the Health Care Provider within seventy-two hours.				Immediately	003(F)(6)(a)
37. Health Care Provider's orders are up-to-date.				Immediately	003(F)(6)
38. Changes in medication orders are handled as new orders.				Immediately	003(F)(6)(d)
39. Transcriptions of Health Care Providers' orders are done accurately and correctly.				Immediately	003(F)(6)(a)
40. Health Care Providers' orders, medication and treatment forms and medication labels are consistent.				Immediately	003(F)(6)
41. PRN orders have specific target symptoms and instructions for use.				Immediately	003(F)(5)(a)
Medication Administration					
42. Site maintains a detailed policy specifying administrative procedures for medical emergencies related to medication administration.				Immediately	003(F)(5)(c)

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43. Over-the-counter medications are administered in accordance with applicable guidelines established by DDS/DMH/DCF and approved by DPH.				Immediately	003(F)(5)(h)
44. Approved medications administered via G-tube/J-tube(s) are given by licensed staff or Certified staff who have completed a specialized training program approved by DPH.				Immediately	003(F)(5)(e)
45. If an individual is receiving insulin, site obtains specific, written parameters from Health Care Provider which provides instructions on when insulin is to be withheld.				10 days	003(F)(5)(a)
46. Staff comply with the instructions noted in the individuals' plan when assisting the individual from a non self-administrating status to a self-administrating status.				10 days	700.001
47. If a medical emergency related to medication(s) occurs, appropriate corrective action(s) is taken within a timely fashion.				10 days	003(F)(5)(c)
Leave of Absences					
48. Site maintains a written LOA policy that is in conformance with DPH guidelines.				30 days	003(F)(4)(b)
49. Site maintains a written policy for obtaining properly labeled containers when an individual receives medication in two or more locations.				30 days	003(F)(4)(c)
50. Site maintains a policy for identifying and educating persons responsible for off-site medication administration (e.g., family members, staff at work programs). Site identifies and educates persons responsible for off-site education.				30 days	003(F)(5)(g)
51. Medications are prepared for LOAs in accordance with DPH policy.				10 days	003(F)(4)(b)

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Medication Storage Area					
52. Site maintains a written policy on access to medication area.				10 days	003(F)(3)(a)
53. Unauthorized personnel can not gain access to medication area.				Immediately	003(F)(3)(a)
54. Medication area is clean of refuse, clutter and personal items.				30 days	003(F)(3)
55. All medications, including OTCs are properly labeled and in-date.				30 days	003(F)(5)(h)
56. Unless prescription plan requires otherwise, no more than a thirty-seven day supply of medication is stored at the site.				Immediately	003(F)(5)(f)
Medication Security					
57. All countable controlled substances are received from the pharmacy in tamper-resistant containers.				Immediately	005(A)
58. All Schedule II-VI controlled substances, including needles and syringes and discontinued medications, are stored in a locked and, where appropriate, refrigerated container or area.				Immediately	003(F)(3)(a)
59. Schedule II-V controlled substances are double-locked.				Immediately	005(A)
60. Individuals, who are self-administering, have medications that are stored in a locked container or area unless the program director makes a determination that unlocked storage poses no threat to the health and safety of all individuals and site meets all applicable regulations.				30 days	003(F)(3)(b)
61. No evidence of tampering or diversion at time of review				Immediately	003(F)(6)(g)

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62. All thefts or losses of controlled substances have been reported <u>immediately</u> to the Drug Control Program, Department of Public Health.				Immediately	003(F)(1)(e)
Countable Controlled Substance Book					
63. Site has a DPH approved Medication Count Book.				Immediately	003(F)(6)(g)
64. Medication Count Book page and numbers are not written on medication cards.				Immediately	006(A)
65. Medication Count found to be correct at time of review.				Immediately	003(F)(6)(g)
66. All Schedule II-V controlled substances, including discontinued medications, are on count.				Immediately	003(F)(6)(g)
67. Count is conducted whenever control of medication key is passed (e.g., at the start and end of shift/assignment).				Immediately	003(F)(6)(g)
68. Countables charted in Medication Count Book as given by staff.				10 days	003(F)(6)(g)
69. Index of Medication Count Book is up-to-date, complete, and used when count conducted.				Immediately	006(A)
70. Count Book pages contain no evidence of crossing out, marking over, ink eradicator, paperclips, tabs, or elastics.				10 days	006(A)
71. Entries are not squeezed in between lines.				10 days	006(A)
72. Continuation pages referenced correctly.				10 days	006(A)
73. Signatures are present for each count, transfer to a new page, medication discontinuation, and medication disposal.				10 days	006(A)

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74. Proper count procedure used which would deter diversion or tampering.				Immediately	006(A)
Medication Disposal					
75. Site maintains a properly executed disposal record when discontinued medications are rendered unusable.				10 days	003(F)(3)(c)
76. All discontinued or out-dated medications are rendered unusable in an approved manner by two staff persons, one of whom must be Certified or licensed and one of whom should be a Certified supervisory staff person.				Immediately	003(F)(3)(c)

Key:

C item in compliance with policy and/or regulations

V Item in violation of policy and/or regulations

N/A Item not applicable at time of review

NOTE: Regulations of the Department of Public Health at 105 CMR 700.005 (D) require that any theft or loss of controlled substances must be reported to the Drug Control Program. Reports must be made no later than the next business day following discovery.

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B. Comments/Recommendations: